Change in Company's premium or rate level produced by rate revision effective Initial 09/01/2008 - this filing proposed 04/01/2010

<u>=</u>	P-oposition	
(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage		
Private Passenger		
Commercial 3. Liability Other Than Auto 4. Burglary and Theft	\$25,870	1.4%
5. Glass 6. Fidelity		
7. Surety 8. Boiler and Machinery 9. Fire		
10. Extended Coverage 11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril 14. Crop Hail		
14. Crop Hall 15. Other		
Line of Insurance		
Does filing only apply to certain If so, specify: Yes	territory (territories)or	certain classes?
Management Liability Rates - Base	Premium Charges for HCCIS	Program.
Brief description of filing. (If organization	filing follows rates of a n): The purpose of this is exceptions to the Man of our AAIC PNP Manag Product which is on is department under fils The new exceptions ap	nn advisory filing is to introduce nagement Liability part gement Portfolio file with your

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

An	erican	Alte	ernati	ve	Insu	rance	Corporation
			Name	of	Com	pany	
		_					
	Stepher	1 J.	Corbe	ett.	-	Vice	President

Official - Title

Dao

	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
	Commercial		
2.	Automobile Physical Damage Private Passenger		
•	Commercial	61 705 700	12.00/
3.	Liability Other Than Auto	\$1,785,792	-12.8%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
0.	Extended Coverage		
1.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril		
4.	Crop Hail		
5.	Other		
	Line of Insurance		
oes f	iling only apply to certain territory (territories) or certain classes? If so, specify:	
rief o	description of filing. (If filing follow	vs rates of an advisory organization, specify of	organization):
		iability Loss Cost filed on our behalf	
	ber GL-2009-BGL1; ISO Circ		
	3 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3		

American Automobile
Insurance Company
Name of Company

William Paukovitz, V.P. Compliance

^{**} Change in Company's premium level which will result from application of new rates.

Change in Company's premium or rate lev	el produced by rate revision effective	06/01/2010
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private Passenger Commercial		
Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto	\$483,377	0.7%
4. Burglary and Theft		
5. Glass6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
	territories) or certain classes? If so, specify:	
Brief description of filing. (If filing follows r Adopting ISO loss costs from filing GL-2009-BGL1; r	rates of an advisory organization, specify orgevising loss cost multiplier.	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level w	hich will result from application of new rates	
		ee and Liability Insurance Company
	N	lame of Company
•	Cindy Schultz - Regulatory S	ervice Analyst
	Only Condize Tragalatory C	Official Title

Forr	m (RF-3)	SUMMARY SHEET	
	Change in Compar revision effective	ny's premium or rate level produced by rate 04/01/10	_·
	(1) _Coverage	(2) Statewide Annual Premium Volume *	(3) Percent Change(+ or -)**
	Automobile Liability Private Passenger Commercial Automobile Physical Damage Private Passenger		
4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14.	Homeowners Commercial Multi-Peril Crop Hail Other Line of Insurance	s324,313 yy(s) or certain class(s)? If so, specify:	-4.0%
Ado	f description of filing. (If filing follo ption of ISO's General Liability Los ignation Number: GL-2009-BC		ganization):
	Adjusted to reflect all prior rate cha Change in Company's premium lev	anges. vel which will result from application of new rates	i.
		American Home Assurance C	ompany
		Name of Company	
		Joan D. Baskerville - Filings Deficial - Title	Analyst

(Change in Company's premium or rate	level produced by rate revision effective	02/01/2010
	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability		
	Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	\$1,316,410	-9.8%
<i>3.</i> 4.	Burglary and Theft	\$1,510,410	2.070
4. 5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does 1	filing only apply to certain territory (te	erritories) or certain classes? If so, specify:	
We	description of filing. (If filing follows wish to adopt ISO's General Linber GL-2009-BGL1; ISO Circu	rates of an advisory organization, specify ability Loss Cost filed on our behalf alar #LI-GL-2009-172.	organization): Funder ISO reference
** C	djusted to reflect all prior rate changes thange in Company's premium level we sult from application of new rates.		

The American	Insurance
Company	

Name of Company

William Paukovitz, V.P. Compliance

Cha	inge in Company's premium or rate level	produced by rate revision effective	06/01/2010
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private		
_	Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	\$2,049,864	1.9%
4.	Burglary and Theft	Ψ2,010,001	
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail		
15.	Other		
	Line of Insurance		
Do	es filing only apply to certain territory (terri	itories) or certain classes? If so, specify:	
יטט	es filling offiny apply to certain territory (terri	nonco, or contain staces. In co, epecing.	
		s of an advisory organization, specify orga	nization):
Ado	pting ISO loss costs from filing GL-2009-BGL1; revis	ing loss cost multiplier.	
*Ac	ljusted to reflect all prior rate changes. hange in Company's premium level which	will result from application of new rates.	
		American Zu	rich Insurance Company
			me of Company
		Cindy Schultz - Regulatory Ser	vice Analyst
			Official Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois) *	Change (+or-) **
Automobile Liability Private		
Passenger		
Commercial		
Automobile Physical Damag		
Private Passenger		
Commercial		
Liability Other Than Auto	14,708,707.79	-4.0%
Burglary and Theft		
Glass		
Fidelity		
Surety	<u></u>	
Boiler and Machinery		
Fire		
Extended Coverage		
Inland Marine		
Homeowners		
Commercial Multi-Peril		
Crop Hail		
Othe <u>r</u>		
Life of Insurance		
Does filing only apply to certa Classes? If so,	ain territory (territories) or	certain
specify: N/A		
opoony.		
	iling follows rates of an a	advison
Brief description of filing. (If I	filing follows rates of an a	advisory
Brief description of filing. (If I Organization, specify	-	·
Brief description of filing. (If the Organization, specify organization):	Arch Insurance Company, a m	nember of Insurance Services Office, Inc. (ISO)
Brief description of filing. (If I Organization, specify	Arch Insurance Company, a m	nember of Insurance Services Office, Inc. (ISO)
Brief description of filing. (If the Organization, specify organization): is filing to adopt ISO's Commercial General Lia *Adjusted to reflect all prior ra **Change in Company's pren	Arch Insurance Company, a mobility loss cost revision as contained in Isaate changes.	nember of Insurance Services Office, Inc. (ISO) SO Reference Filing Number GL-2009-BGL1.
Brief description of filing. (If forganization, specify organization): is filing to adopt ISO's Commercial General Lia *Adjusted to reflect all prior ra	Arch Insurance Company, a mobility loss cost revision as contained in Islate changes. nium level which will resu	nember of Insurance Services Office, Inc. (ISO). SO Reference Filing Number GL-2009-BGL1. Ilt from application of new
Brief description of filing. (If the Organization, specify organization): is filing to adopt ISO's Commercial General Lia *Adjusted to reflect all prior ra **Change in Company's pren	Arch Insurance Company, a mobility loss cost revision as contained in Islate changes. nium level which will resurance Co	nember of Insurance Services Office, Inc. (ISO) SO Reference Filing Number GL-2009-BGL1. Ult from application of new ompany
Brief description of filing. (If the Organization, specify organization): is filing to adopt ISO's Commercial General Lia *Adjusted to reflect all prior ra **Change in Company's pren	Arch Insurance Company, a mobility loss cost revision as contained in Islate changes. nium level which will resurance Co	nember of Insurance Services Office, Inc. (ISO) SO Reference Filing Number GL-2009-BGL1. Ilt from application of new ompany Impe of Company

4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance	(3) Percent Change (+ or -)**	(2) Annual Premium Volume (Illinois)*	(1) <u>Coverage</u>	
2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto \$73,309 -13.49 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other			Private Passenger	1.
3. Liability Other Than Auto \$73,309 -13.49 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance			Automobile Physical Damage Private Passenger	2.
4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance	3.4%	3,309	-	3.
5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance			Burglary and Theft	4.
7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance				
7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance			Fidelity	6.
9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance			•	7.
10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance		·	Boiler and Machinery	8.
11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance			Fire	9.
2. Homeowners			Extended Coverage	l 0 .
13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance			Inland Marine	11.
14. Crop Hail 15. Other Line of Insurance				12.
15. Other Line of Insurance			Commercial Multi-Peril	13.
Line of Insurance			Crop Hail	14.
				15.
oes filing only apply to certain territory (territories) or certain classes? If so, specify:			Line of Insurance	
		s) or certain classes? If so, specify:	ling only apply to certain territory (ter	oes fil
Brief description of filing. (If filing follows rates of an advisory organization, specify organization with the adopt ISO's General Liability Loss Cost filed on our behalf under number GL-2009-BGL1; ISO Circular #LI-GL-2009-172.	inization): der ISO reference	Loss Cost filed on our behalf	vish to adopt ISO's General Lia	We w

Associated Indemnity Corp.

Name of Company

William Paukovitz,
V.P. Compliance
Official - Title

Ch	ange in Company's premium or rate le	vel produced by rate revision effective	03/15/2010
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private		
-	Passenger Commercial		
2.	Automobile Physical Damage		
3	Private Passenger Commercial Liability Other Than Auto	\$5,820,536.	+5.5%
4.		ψ0,020,000.	
	Glass		
	Fidelity		
	Surety Boiler and Machinery		
	Fire		ILEU
	Extended Coverage		
	. Inland Marine		OCT 1 2 2009
	. Homeowners . Commercial Multi-Peril		
	. Crop Hail		STATE OF ILLINOIS ARTMENT OF INSURANCE SPRINGFIELD, ILLINOIS
15	. Other		STATENT OF INSURAN
	Line of Insurance	DEP	SPRINGFIELD, 12
Do	pes filing only apply to certain territory	/ (territories) or certain classes? II so,	specify. We are rewriting our blue Chip
Po	olicy Program. This filing applies to	Directors and Officers Liability, Emp	loyment Practices Liability, Trustee and
Fig	duciary Liability and Trust Department	Errors and Omissions. All territories a ge and Bankers Professional Liability C	are included. We are also introducing two
HE	w coverages, internet Security Covera	ge and bankers Professional Elability C	overage.
Br	ief description of filing. (If filing follows	s rates of an advisory organization, spe	ecify organization): Our revised rules and drates of our key competitors, including
Ch	oubb Travelers Philadelphia Progres	sive. USLI, and CNA and on a study of	f the policies that we currently write (rates
an	d typical coverage limits). We raised	the Increased Limit Factors for most c	overage parts. We lowered the Increased
Lir	nit Factors for Privately Held D&O	and Employment Practices Liability In	surance. We lowered the base annual
pro	emiums for entities with smaller asset	bases for our Privately Held, Financia	I Institutions, and Health Care Institutions n the same. We lowered the base annual
שט	emiums for entities with the lowest total	I plan assets (under \$500,001) for the	Trustee & Fiduciary Liability and Employee
Be	enefits Administration form. We lowere	ed the base annual premium at all total	trust asset levels for the Trust Department
Er	rors & Omissions Coverage Part for F	inancial Institutions. The net effect for	the changes to our Directors and Officers
Lia	ability Coverage is +6.5%. The net effe	ty changes is +16.7%. The net effect	ctices Liability Coverage is -3.4%. The net for the changes to the Trust Department
Er	rors and Omissions Coverage is +12.7	%. The overall net effect to the program	n of all changes combined is +5.5%.
_			
_			
*Δ	djusted to reflect all prior rate changes		
		hich will result from application of new	rates.
		The Object of the	
		i ne Cincinnati i	nsurance Company - FEIN 31-0542366 Name of Company
		Connie Pe	tertonjes - Senior Filings Specialist Official - Title
			Official - Title

ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate	level produced by rate revision effective	03/15/2010
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial 2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto	\$39,574,840.	+3.02%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territoriclasses are being amended.	ry (territories) or certain classes? If so, spe	cify: All territories are included and all
increased limit tables according to ISC	ws rates of an advisory organization, specifological design. #GL-2008-IALL1. These changes for Prod/CO. Additionally, we are amend	result in a net increase of 2.84% for
	od/CO. The overall net effect of both of these	
net effect of +3, 13 % and -0.20 % for F10	DU/CO. THE OVERAIL HET Effect of Both of thes	e changes is . 0.0270.
		* 12 1 14 15 15 15 15 15 15 15 15 15 15 15 15 15 15 15
		and the second of the second o
*Adjusted to reflect all prior rate change **Change in Company's premium level	es. which will result from application of new rate	s.
	The Cincinnet Inc.	Company FEIN 24 0540000
	i ne Cincinnati Insu	rance Company - FEIN 31-0542366 Name of Company
		Tamo or Company
	Connie Peterto	onjes - Senior Filings Specialist
		Official – Title

Char	nge in Company's premium or rate le	vel produced by rate revision effective or	1/31/2010
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liebilite Drivete		
١.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage		
••	Private Passenger Commercial		
3.	Liability Other Than Auto	2,062,136	8.0%
	Burglary and Theft		
	Glass		
) .	Fidelity		
7 .	Surety		
	Boiler and Machinery		
	Fire		
	Extended Coverage		
	Inland Marine		
	Homeowners		
	Commercial Multi-Peril		
	Crop Hail	44.4	
5.	Other		
	Line of Insurance		
100	s filing only apply to cortain territory	territories) or certain classes? If so, speci	fv: No
OE:	s illing only apply to certain territory (territories) or certain classes: if so, speci	Ty. 140
	density of Charles (IEC)		i-atian)
		rates of an advisory organization, specify	organization):
lling	to adopt ISO Loss Costs and rules and revise	LCM'S.	
'Adiι	usted to reflect all prior rate changes		
		hich will result from application of new rat	es.
		Citizens	Insurance Company of America
			Name of Company
		Michel	e L. Holm - Pricing Consultant
			Official – Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 01/31/2010 (3) (2) (1) **Percent Annual Premium** Change (+ or -)** Volume (Illinois)* Coverage **Automobile Liability Private** Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 12.9% 3. Liability Other Than Auto 83,019 **Burglary and Theft** 4. Glass 5. **Fidelity** 6. 7. Surety 8. **Boiler and Machinery** 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Does filing only apply to certain territory (territories) or certain classes? If so, specify: Brief description of filing. (If filing follows rates of an advisory organization, specify organization): Filing to adopt ISO Loss Costs and rules and revise LCM's. *Adjusted to reflect all prior rate changes. **Change in Company's premium level which will result from application of new rates. Citizens Insurance Company of Illinois Name of Company Michele L. Holm - Pricing Consultant Official - Title

Change in Company's premium or rate level produced by rate revision effective _			06/01/2010	
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
1.	Automobile Liability Private Passenger Commercial			
2.	Automobile Physical Damage Private Passenger Commercial			
3. 4.	Liability Other Than Auto Burglary and Theft	\$40,534	-8.1%	
5. 6. 7.	Glass Fidelity Surety			
8. 9.	Boiler and Machinery Fire			
11.	Extended Coverage Inland Marine			
13.	Homeowners Commercial Multi-Peril			
	Other			
	es filing only apply to certain territory (terr	ritories) or certain classes? If so, specify:es of an advisory organization, specify organization.	anization):	
	oting ISO loss costs from filing GL-2009-BGL1; revision			
	ijusted to reflect all prior rate changes. hange in Company's premium level whic	h will result from application of new rates.		
			an Casualty & Surety Company me of Company	
		Cindy Schultz - Regulatory Ser	vice Analyst	
			Official - Title	

Form (RF-3)		SUMMARY SHEET	
	Change in Company revision effective	y's premium or rate level produced by rate 04/01/10	_·
	(1) Coverage	(2) Statewide Annual Premium Volume *	(3) Percent Change (+ or -)**
Automobi Private Comme	Passenger		
2. Automobi	le Physical Damage Passenger		
 Liability C Burglary a Glass Fidelity Surety Boiler and Fire Extended Inland Ma Homeowr Commerce Crop Hail Other 	other Than Auto and Theft d Machinery Coverage arine hers cial Multi-Peril	y(s) or certain class(s)? If so, specify:	-4.0%
	O's General Liability Los		ganization):
	o reflect all prior rate cha Company's premium leve	nges. el which will result from application of new rates Commerce and Industry Insurance Name of Company Joan D. Baskerville - Filings Official - Title	ce Company

Change in	Company's	premium	or	rate	level	produced	by	rate
revision	effective	10/1/09						

revision effective I	0/1/09	•
(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
 Automobile Liability Private Passenger Commercial 		
 Automobile Physical Damag Private Passenger Commercial 		
3. Liability Other Than Auto	92695	+6.8%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insuranc	e	
	rtain territory (territories)on applies to territories outsid	
II bo, bpccity. Into titing	applied to collisories thanks	
	(If filing follows rates of a zation): This filing is incre	
territories outside of Cook	County from 1.33 to 1.57; the	LCM for Cook County
will remain the same.		
* Adjusted to reflect all p	rior rate changes.	

** Change in Company's premium level which will result from application of new rates.

Companion Property & Casualty Insurance Company
Name of Company

Manager of Actuarial Services
Official - Title

H29219D

Change in Company's premium or rate level produced by rate Revision effective <u>02/01/2010</u>

Annual Premium Volume (Illinois)* Change (+ or -)** 1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance coes filing only apply to certain territory (territories) or certain classes? If so, specify: No. * Adjusted to reflect all prior rate changes. * Change in Company's premium level which will result from application of new rates. * Continental Western Insurance Company Name of Company Janel Myers - Research Analyst Official - Titte		(1)	(2)	(3)
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance 16. Line of Insurance 17. Line of Insurance 18. Serving the Commercial Auto Physical Damage and General Liability rates for our 18. Country Commodities Distributors Policy Program. * Adjusted to reflect all prior rate changes. * Change in Company's premium level which will result from application of new rates. Continental Western Insurance Company Name of Company		Coverage		
Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 5623,228 4.4% 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance coes filing only apply to certain territory (territories) or certain classes? If so, specify: No. rief description of filing. (If filing follows rates of an advisory Organization, specify organization): Revising the Commercial Auto Physical Damage and General Liability rates for our Country Commodities Distributors Policy Program. * Adjusted to reflect all prior rate changes. * Change in Company's premium level which will result from application of new rates. Continental Western Insurance Company Name of Company Janel Myers - Research Analyst				
Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance coes filing only apply to certain territory (territories) or certain classes? If so, specify: No. rief description of filing. (If filing follows rates of an advisory Organization, specify organization): Revising the Commercial Auto Physical Damage and General Liability rates for our Country Commodities Distributors Policy Program. * Adjusted to reflect all prior rate changes. * Change in Company's premium level which will result from application of new rates. Continental Western Insurance Company Name of Company Name of Company Janel Myers - Research Analyst	1.			
2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance 16. Singling only apply to certain territory (territories) or certain classes? If so, specify: No. 17. Revising the Commercial Auto Physical Damage and General Liability rates for our Country Commodities Distributors Policy Program. 18. Adjusted to reflect all prior rate changes. 18. Continental Western Insurance Company Name of Company Name of Company Sanet Market Passenger 3. 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4% 4.4.4 4.4.4 4.4.4 4.4.4 4.4.4 4.4.4		<u>-</u>		
Private Passenger Commercial S186,723 3.4% 3. Liability Other Than Auto S623,228 4.4% 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance coes filling only apply to certain territory (territories) or certain classes? If so, specify: No. rief description of filing. (If filing follows rates of an advisory Organization, specify organization): Revising the Commercial Auto Physical Damage and General Liability rates for our Country Commodities Distributors Policy Program. * Adjusted to reflect all prior rate changes. * Change in Company's premium level which will result from application of new rates. Continental Western Insurance Company Name of Company Name of Company Janel Myers - Research Analyst				
Commercial S186,723 3.4% 3. Liability Other Than Auto S623,228 4.4% 4. Burglary and Theft Sidass Sidass Sidelity Surety Sur	2.			
3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance coes filing only apply to certain territory (territories) or certain classes? If so, specify: No. Revising the Commercial Auto Physical Damage and General Liability rates for our Country Commodities Distributors Policy Program. * Adjusted to reflect all prior rate changes. * Change in Company's premium level which will result from application of new rates. Continental Western Insurance Company Name of Company Janel Myers - Research Analyst		_		
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6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance test filing only apply to certain territory (territories) or certain classes? If so, specify: 16. So, specify: 17. Adjusted to reflect all prior rate changes. 18. Change in Company's premium level which will result from application of new rates. 18. Continental Western Insurance Company 19. Name of Company 19. Name of Company 19. Name of Company 19. Surety 19. Name of Company 19. Surety 19. S	4.	Burglary and Theft		
7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance Des filing only apply to certain territory (territories) or certain classes? If so, specify: No. Line description of filing. (If filing follows rates of an advisory Organization, specify organization): Revising the Commercial Auto Physical Damage and General Liability rates for our Country Commodities Distributors Policy Program. Adjusted to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates. Continental Western Insurance Company Name of Company Name of Company	5.	Glass		
8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance 16. Description of filing. (If filing follows rates of an advisory Organization, specify organization): 17. Revising the Commercial Auto Physical Damage and General Liability rates for our 18. Adjusted to reflect all prior rate changes. 19. Change in Company's premium level which will result from application of new rates. 18. Dentinental Western Insurance Company Name of Company 19. Janel Myers - Research Analyst	6.	Fidelity		
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14. Crop Hail 15. Other Line of Insurance Des filing only apply to certain territory (territories) or certain classes? If so, specify: No. Dief description of filing. (If filing follows rates of an advisory Organization, specify organization): Revising the Commercial Auto Physical Damage and General Liability rates for our Country Commodities Distributors Policy Program. 4 Adjusted to reflect all prior rate changes. 5 Change in Company's premium level which will result from application of new rates. Continental Western Insurance Company Name of Company Janel Myers - Research Analyst				
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Line of Insurance Description only apply to certain territory (territories) or certain classes? If so, specify: No. Dief description of filing. (If filing follows rates of an advisory Organization, specify organization): Revising the Commercial Auto Physical Damage and General Liability rates for our Country Commodities Distributors Policy Program. Adjusted to reflect all prior rate changes. Change in Company's premium level which will result from application of new rates. Continental Western Insurance Company Name of Company Janel Myers - Research Analyst		•		
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rief description of filing. (If filing follows rates of an advisory Organization, specify organization): Revising the Commercial Auto Physical Damage and General Liability rates for our Country Commodities Distributors Policy Program. * Adjusted to reflect all prior rate changes. * Change in Company's premium level which will result from application of new rates. Continental Western Insurance Company Name of Company Janel Myers - Research Analyst				
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Change in Company's premium level which will result from application of new rates. Continental Western Insurance Company Name of Company Janel Myers - Research Analyst	.ou	ntry Commodities Distributors For	icy Frogram.	
Change in Company's premium level which will result from application of new rates. Continental Western Insurance Company Name of Company Janel Myers - Research Analyst				, <u></u>
Change in Company's premium level which will result from application of new rates. Continental Western Insurance Company Name of Company Janel Myers - Research Analyst	٠ ۸	directed to reflect all prior rate change	· .	
Continental Western Insurance Company Name of Company Janel Myers - Research Analyst				of new rates
Name of Company Janel Myers - Research Analyst	Č	nange in Company s premium lever v	vinen win result from appreasion	or now rates.
Name of Company Janel Myers - Research Analyst				
Name of Company Janel Myers - Research Analyst				
Janel Myers - Research Analyst			Continental West	ern Insurance Company
			Name	of Company
Official - Title				
29219D			Off	icial - Title

ILLINOIS DEPARTMENT OF INSURANCE

Chang	e in Company's premium or rate le	11/01/2009	
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. Au	tomobile Liability Private		
ο A.	Passenger Commercial		
Z. Au	tomobile Physical Damage		
3. Lia	Private Passenger Commercial _ability Other Than Auto _	\$2,753,263	-5.9%
	rglary and Theft	Ψ2,100,200	0.070
	ass		
	delity _		
7. Su			
	iler and Machinery		
9. Fir			
10. Ex	tended Coverage		
	and Marine		
	meowners _		
	ommercial Multi-Peril _		
	op Hail _		
15. Ot	her Line of Insurance		
	Line of Insurance		
Does f	iling only apply to certain territory (t	territories) or certain classes? If so, specify:	No
		ates of an advisory organization, specify or	
	ted to reflect all prior rate changes. nge in Company's premium level wl	nich will result from application of new rates	
		Diagona December	9 Carualty Inguirance Company
			& Casualty Insurance Company Name of Company
		Susan Boe	ttcher, Regulatory Analyst Official – Title

ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate level produced by rate revision effective			04/01/2010	
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)</u> *	(3) Percent <u>Change (+ or -)**</u>	
1.	Automobile Liability Private			
2.	Passenger Commercial Automobile Physical Damage			
	Private Passenger Commercial _			
3.		\$2,753,263	-4.0%	
4.	Burglary and Theft			
	Glass _			
	Fidelity _ Surety _			
	Boiler and Machinery			
	Fire			
	Extended Coverage			
	. Inland Marine			
	. Homeowners			
	. Commercial Multi-Peril			
	. Crop Hail _			
15	. Other Line of Insurance			
	Line of insulation			
Do	es filing only apply to certain territory (t	territories) or certain classes? If so, specify	: <u>No</u>	
		ates of an advisory organization, specify or		
	djusted to reflect all prior rate changes. Change in Company's premium level wh	nich will result from application of new rates	S.	
		Discover Property	& Casualty Insurance Company	
		<u>Discover Froperty</u>	Name of Company	
			, ,	
		Susan Boe	ttcher, Regulatory Analyst	
			Official - Title	

Change in Company's premium or rate level բ	produced by rate revision effective	06/01/2010
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial	<u></u>	
3. Liability Other Than Auto	\$559,179	9.4%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
10. Extended Coverage		
11. Inland Marine	<u> </u>	
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail 15. Other		
Line of Insurance		
Line or insurance		
Does filing only apply to certain territory (territ	ories) or certain classes? If so, specify:	
Brief description of filing. (If filing follows rates Adopting ISO loss costs from filing GL-2009-BGL1; revisir		
Adjusted to reflect all prior rate changes. *Change in Company's premium level which	will result from application of new rates.	
	Empire Fire & N	Marine Insurance Company
	Nan	ne of Company
	Cindy Schultz - Regulatory Serv	rice Analyst
		fficial - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

(1)	(2) Annual Premium	(3) Percent
Coverage	Volume (Illinois) *	_ Change (+or-) **
Automobile Liability Private		
Passenger	····	
Commercial	**************************************	
Automobile Physical Damag		
Private Passenger		
Commercial		
_iability Other Than Auto	-4.0	8,096,053
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire Fire		
Extended Coverage		
nland Marine		
Homeowners		***
Commercial Multi-Peril	·	
Crop Hail	**************************************	
Othe <u>r</u>		
Life of Insurance		
Does filing only apply to certa	ain territory (territories) or	certain
Classes? If so,	, , , , , , , , , , , , , , , , , , , ,	
specify: No		
Brief description of filing. (If the	filing follows rates of an a	advisory
Organization, specify		
organization):	Adoption of ISO Gene	ral Liability Advisory Prospe
Loss Cost Revision.		

Name of Company Mitchel Merberg, Vice President, MAAA, FCAS

Change in Company's premium or rate level p	produced by rate revision effective	06/01/2010
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illi</u> nois)*	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto	\$79,685	-12.7%
Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
B. Boiler and Machinery		
9. Fire		
Extended Coverage		
1. Inland Marine		
2. Homeowners		
Commercial Multi-Peril		
4. Crop Hail		
5. Other		
Line of Insurance		
Ooes filing only apply to certain territory (terri	s of an advisory organization, specify org	<u> </u>
Adjusted to reflect all prior rate changes. *Change in Company's premium level which	•	posit Company of Maryland
		me of Company
	Cindy Schultz - Regulatory Ser	vice Analyst
	· · · · · · · · · · · · · · · · · · ·	Official Title

	Change in Company's premium or rate	level produced by rate revision effective	2/01/2010
	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	\$2,494,870	-10.4%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		- was a subsection of the subs
15.	Other		
	Line of Insurance		
Does	filing only apply to certain territory (ter	rritories) or certain classes? If so, specify:	
We		rates of an advisory organization, specify on bility Loss Cost filed on our behalf lar #LI-GL-2009-172.	
** (Adjusted to reflect all prior rate changes Change in Company's premium level wheresult from application of new rates.		

Fireman's Fund Insurance Co.

Name of Company

William Paukovitz, V.P. Compliance

Section 754 EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 12/1/2009 New Business; 1/1/2010 Renewal Business .

		
(1)	(2)	(3)
(' /	Annual Premium	Percent
Coverage	- Volume (Illinois) *	Change (+or-) **
Automobile Liability Private	voidino (iiii lolo)	- Change (101)
Passenger		
Commercial		
Automobile Physical Damag		
Private Passenger		•
Commercial		
Liability Other Than Auto	\$47,852.00	1.36%
Burglary and Theft		
Glass		
Fidelity		
Surety		
Boiler and Machinery		
Fire	,	
Extended Coverage	**************************************	
Inland Marine		
Homeowners	######################################	
Commercial Multi-Peril		
Crop Hail		
Other		
Life of Insurance		
End of modification		
Does filing only apply to certa	ain territory (territories) o	r certain
Classes? If so,		2
specify: No		personal um
		V
Brief description of filing. (If	filing follows rates of an a	advisory
Organization, specify		
organization):		ured/underinsured motorsist coverage,
youthful drivers and two million dollar lin	nit.	
*Adjusted to reflect all prior ra		di fan an anadên d
**Change in Company's pren	nium level which will rest	uit from application of new
rates.	Grange Mutual Co	agualty Company
	Grange Mutual Ca	
	Na	ame of Company

Brett C. Helf, Product Manager

Form (RF-3)		SUMMARY SHEET	
	Change in Company revision effective	o's premium or rate level produced by rate 04/01/10	
	(1) _Coverage	(2) Statewide Annual Premium Volume *	(3) Percent Change (+ or -)**
2. 3. 4. 5. 6. 7. 8. 9. 10. 11. 12. 13. 14. 15.	Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Line of Insurance	\$2,346,830 \$2,346,830 (s) or certain class(s)? If so, specify:	-4.0%
Ado Des	ption of ISO's General Liability Loss ignation Number: GL-2009-BG	L1	anization):
	Adjusted to reflect all prior rate char Change in Company's premium leve	el which will result from application of new rates.	
		Granite State Insurance Con Name of Company	npany
		Name of Company	
		Joan D. Baskerville - Filings A Official - Title	Analyst
		Oniciai - Title	

(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
-		 -
Automobile Liability Private Passenger Commercial		
L. Automobile Physical Damage		
Private Passenger Commercia	al	
. Liability Other Than Auto	1,391,690	8.0%
. Burglary and Theft	1,001,000	
. Glass		
. Fidelity		
. Surety		
. Boiler and Machinery		
. Fire		
Extended Coverage		
Inland Marine		
2. Homeowners		
3. Commercial Multi-Peril		
4. Crop Hail		
5. Other		
Line of Insurance		
loes filing only apply to certain territor	y (territories) or certain classes? If so, specif	fv: No
des ming only apply to certain territor	y (territories) or certain classes: if so, opeon	10
Brief description of filing. (If filing follow	vs rates of an advisory organization, specify	organization):
ling to adopt ISO Loss Costs and rules and rev	ise LCM's.	
Adjusted to reflect all prior rate chang		
'Change in Company's premium leve	I which will result from application of new rate	es.
	Har	nover Insurance Company
		Name of Company
	Michela	E. Holm - Pricing Consultant
	- Wildi Cit	Official – Title

Form (RF-3)		SUMMARY SHEET	
	Change in Company revision effective	's premium or rate level produced by rate 04/01/10	
	(1) Coverage	(2) Statewide Annual Premium Volume *	(3) Percent Change (+ or -)**
2. Au	tomobile Liability Private Passenger Commercial tomobile Physical Damage Private Passenger		
3. Lia 4. Bu 5. Gla 6. Fid 7. Su 8. Bo 9. Fin 10. Ex 11. Inla 12. Ho 13. Co 14. Cre 15. Ott	delity rety iler and Machinery e tended Coverage and Marine emeowners emmercial Multi-Peril op Hail her Line of Insurance	\$151,848 (s) or certain class(s)? If so, specify:	-4.0%
Adoptio	escription of filing. (If filing follow n of ISO's General Liability Loss ation Number: GL-2009-BGI		ganization):
	isted to reflect all prior rate chan	nges. I which will result from application of new rates	
		Illinois National Insurance	Co.
		Name of Company Joan D. Baskerville - Filings	∆nalvet
		Official - Title	nialyst

(Change in Company's premium or rate	e level produced by rate revision effective	e <u>2/1/2010</u>
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
1.	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$462,578	-0.7%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
3.	Boiler and Machinery		
₽.	Fire		
Э.	Extended Coverage		
l.	Inland Marine		
2.	Homeowners		
3.	Commercial Multi-Peril	****	-
1.	Crop Hail		
5.	Other Line of Insurance		
	iling only apply to certain territory (to th & Fitness Program – Territories 1,	erritories) or certain classes? If so, specif 4, 6, 7, 8, 9 & 14	y:
	description of filing. (If filing follows pendent rating rules and rates for use	rates of an advisory organization, specification with our Health & Fitness Program	y organization):
* C	djusted to reflect all prior rate change hange in Company's premium level w sult from application of new rates.		
		Mar	kel Insurance Company
			Name of Company
			dre I. Balbuena,
		VP	Product & Regulatory Services
			Official - Title

(Change in Company's premium or rat	e level produced by rate revision effective	12/1/2009
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$21,340	-60.2%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	iling only apply to certain territory (to	erritories) or certain classes? If so, specify:	
		rates of an advisory organization, specify of	organization):
Educ	cator's Legal Liability revised rates	/rules.	
			W-4,

* Adjusted to reflect all prior rate changes.

** Change in Company's premium level which will result from application of new rates.

Markel Insurance Company
Name of Company

Deidre Balbuena, VP Product & Regulatory Services

Official - Title

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 01/31/2010

	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	1,656,136	10.0%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
	Extended Coverage		****
	Inland Marine		
	Homeowners	·	
	Commercial Multi-Peril		
	Crop Hail		
15.	Other		
	Line of Insurance		
Doe	es filing only apply to certain territory (territories) or certain classes? If so, specify:	No
		rates of an advisory organization, specify or	ganization):
Filing	g to adopt ISO Loss Costs and rules and revise	LCM's.	
	<u> </u>		
	justed to reflect all prior rate changes hange in Company's premium level w	hich will result from application of new rates	
		Massachus	etts Bay Insurance Company
			lame of Company
		Michele L	. Holm - Pricing Consultant
			Official – Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

Change in Company's premium o	rate level produced by rate revision
effective 11/01/2009	

-	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2	Automobile Physical Damag		_
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	61,556	-5.9
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		,
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Life of Insurance		
•	Does filing only apply to certa	in territory (territories) or	certain
	Classes? If so,		
	specify: N/A		
	Brief description of filing. (If fi	iling follows rates of an ac	dvisory
	Organization, specify		
	organization):		oss potentials supplement
	contained in ISO Reference Filing I	Number GL-2009-RELP1.	
	*Adjusted to reflect all prior ra		
	**Change in Company's prem	ium level which will resul	t from application of new
	rates.		_
			Insurance Company
			ne of Company
		Jennifer Carr, Rate	
		C	Official – Title

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$2,381,042	-11.0%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
oes f	filing only apply to certain territory ((territories) or certain classes? If so, specify:	
Brief	description of filing. (If filing follow	ws rates of an advisory organization, specify of	organization):
		iability Loss Cost filed on our behalf	
	iber GL-2009-BGL1; ISO Circ		
11011	001 02 2009 2021, 100 011		

National Surety Corporation Name of Company

William Paukovitz, V.P. Compliance Official - Title

^{**} Change in Company's premium level which will result from application of new rates.

Form (RF-3)	SUMI	MARY SHEET	
Change in revision ef		n or rate level produced by rate	_·
(1) <u>Coverag</u> e		(2) Statewide Annual Premium Volume *	(3) Percent Change (+ or -)**
Automobile Liability Private Passenger Commercial Automobile Physical Dar Private Passenger Commercial Liability Other Then Automobile			-4.0%
 Liability Other Than Auto Burglary and Theft Glass Fidelity Surety Boiler and Machinery Fire Extended Coverage Inland Marine Homeowners Commercial Multi-Peril Crop Hail Other Line of Insurance Does filing only apply to certa		\$778,412	-4.0%
Adoption of ISO's General Lia		an advisory organization, specify org	ganization):
* Adjusted to reflect all prior ** Change in Company's pre		result from application of new rates	i.
	Nati	onal Union Fire Insurance Company Name of Company	y of Pittsburgh, Pa.
		Joan D. Baskerville - Filings Official - Title	Analyst

Form (RF-3)		SUMMARY SHEET	
	Change in Compan revision effective	y's premium or rate level produced by rate 04/01/10	_·
	(1) Coverage	(2) Statewide Annual Premium Volume *	(3) Percent Change (+ or -)**
Priva Com 2. Automo Priva	bile Liability te Passenger mercial bile Physical Damage te Passenger		
3. Liability 4. Burglan 5. Glass 6. Fidelity 7. Surety 8. Boiler a 9. Fire 10. Extende 11. Inland N 12. Homeo 13. Comme 14. Crop Ha 15. Other	wners ercial Multi-Peril ail Line of Insurance	\$2,314,878	-4.0%
	SO's General Liability Los		ganization):
	to reflect all prior rate cha n Company's premium leve	nges. el which will result from application of new rates	3.
		New Hampshire Insurance C	ompany
		Name of Company	
		Joan D. Baskerville - Filings Official - Title	Analyst

RECEIVED

OCT 16 2009

Form (RF-3)

SUMMARY SHEET DEPARTMENT OF INSURANCE SPRINGFIELD

Mary Lynn Teel, State Filings Analyst
Official - Title

	(1)	(2)	(3)
	<u>Coverage</u>	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability Private Passenger		
2.	Commercial Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	\$(126,689)	-4.0%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
oes f	filing only apply to certain territory (territories) or certain classes? If so, specify	
	description of filing. (If filing follow ption of Illinois GL Advisory Prospe	ys rates of an advisory organization, specify ctive Loss Costs.	organization):
* C	djusted to reflect all prior rate chang hange in Company's premium level v esult from application of new rates.		
			surance Company of America

1.

2

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision.

effective 11/01/2009	·	oy rate revision
(1)	(2)	(3)
,	Annual Premium	Percent
Coverage	Volume (Illinois) *	Change (+or-) **
Automobile Liability Private		,
Passenger		
Commercial		
Automobile Physical Damag		

- Private Passenger

 Commercial

 3. Liability Other Than Auto 5,827 -5.9
- 4. Burglary and Theft
 5. Glass
- 5. Glass
 6. Fidelity
 7. Surety
- 8. Boiler and Machinery
 9. Fire
- 10. Extended Coverage11. Inland Marine12. Homeowners
- 13. Commercial Multi-Peril
- 14. Crop Hail

 15. Other

 Life of Insurance

Does filing only apply to certain territory (territories) or certain

Classes? If so, specify: N/A

Brief description of filing. (If filing follows rates of an advisory
Organization, specify
organization):

Adoption of estimated loss potentials supplement

contained in ISO Reference Filing Number GL-2009-RELP1.

State National Insurance Company Inc.

Name of Company
Jennifer Carr, Rate and Form Analyst

Official – Title

^{*}Adjusted to reflect all prior rate changes.

^{**}Change in Company's premium level which will result from application of new rates.

ILLINOIS DEPARTMENT OF INSURANCE

Change in Company's premium or rate le	vel produced by rate revision effective	April 1, 2010
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liability Private Passenger Commercial 2. Automobile Physical Damage Private Passenger Commercial 3. Liability Other Than Auto 4. Burglary and Theft 5. Glass 6. Fidelity 7. Surety 8. Boiler and Machinery 9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners 13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance	\$147,851	-4.0%
Does filing only apply to certain territory (Brief description of filing. (If filing follow Reference GL-2009-BGL1. *Adjusted to reflect all prior rate changes. **Change in Company's premium level with the company of the certain territory (1) and 1) are company of the certain territory (1) and 1) are company of the certain territory (1) and 1) are company of the certain territory (1) and 1) are company of the certain territory (1) and 1) are company of the certain territory (1) and 1) are company of the certain territory (1) and 1) are company of the certain territory (1) and 1) are company of the certain territory (1) and 1) are company of the certain territory (1) are company of t	ws rates of an advisory organization, s	specify organization): <u>Adoption of ISO</u>
	<u>Walter J Kozuch,</u>	Vice President - Technical Services Official - Title

	Change in Company's pre revision effective	emium or rate level produced by rate 4/1/2010	
	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$11	-4.0%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
		* 2008 Written Premium	
	s Filing only apply to certain territonses? If so, specify:	ory (territories) or certain	
Dric	f description of filing. (If filing follo	we rates of an advisory	
	nization, specify organization):	Adoption of ISO's General Liability	Advisory Prospective
•		Loss Costs revision	
		GL-2009-BGL1	

Technology	Insurance Co.
• • •	

Name of Company

Barry W. Moses, VP Regulatory & Compliance

^{*} Adjusted to reflect all prior rate changes.

^{**} Change in Company's premium level which will result from application of new rates.

10/21/09

(Change in Company's premium or rat	e level produced by rate revision effective	Upon Approval
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger		
2.	Commercial Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	\$332,140	-14.5%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity	PECEIV	
7.	Surety	- Residence	
8.	Boiler and Machinery		
9.	Fire	OCT 2.1 200	19
10.	Extended Coverage	UC 1 2, 1 200	J J
11.	Inland Marine		
12.	Homeowners	STATE OF ILLIN	OIS
13.	Commercial Multi-Peril	DEPARTMENT OF INS	30.0
14.	Crop Hail	SPRINGFIELL	
15.	Other		
	Line of Insurance		
	iling only apply to certain territory (to filing applies to the Insurance Agents	erritories) or certain classes? If so, specify: s E&O Product.	
	description of filing. (If filing follows are filing to revise minimum premium	s rates of an advisory organization, specify of specify of the specify of the specific of the	organization):

* Adjusted to reflect all prior rate changes.
 ** Change in Company's premium level which will result from application of new rates.

United States Liability Ins. Co. Name of Company

Mark Miller, State Filings Manager Official - Title

(Change in Company's premium or rat	te level produced by rate revision effective	Upon Approval 11.17.9
	(1)	(2)	(3)
	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability Private Passenger		
2.	Commercial Automobile Physical Damage Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$437,797	-3.6%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
		erritories) or certain classes? If so, specify: e and above average hazard groups with rec	eipts greater than \$3,000,000.
We a	are filing to revise Average and Abov	s rates of an advisory organization, specify of e Average Hazard Group professional liabilion, we are revising the General Liability Blanal charge.	ty rates for insureds with
* A	diusted to reflect all prior rate change	25	

* Adjusted to reflect all prior rate changes.** Change in Company's premium level which will result from application of new rates.

> United States Liability Ins. Co. Name of Company

Mark Miller, State Filings Manager
Official - Title

	Change in Company's pre revision effective	emium or rate level produced by rate 4/1/2010	
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3. 4. 5.	Liability Other Than Auto Burglary and Theft Glass	\$10,416	-4.0%
6.	Fidelity		
7. 8. 9.	Surety Boiler and Machinery Fire		
10. 11.	Extended Coverage Inland Marine		
12. 13.	Homeowners Commercial Multi-Peril		
14. 15.	Crop Hail Other		
	Line of Insurance	* 2008 Written Premium	
	s Filing only apply to certain territo ses? If so, specify:	ory (territories) or certain	
	f description of filing. (If filing followinization, specify organization):	ws rates of an advisory Adoption of ISO's General Liability	Advisory Prospective
J -	,	Loss Costs revision GL-2009-BGL1	
		GL-2009-BGL1	

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

۱A	lacas	Incuran	~~ ~	ompany
V١	resco	msuran	ce C	omioanv

Name of Company

Barry W. Moses, VP Regulatory & Compliance

Change in Company's Premium or	rate level produced by rate revisio	n effect 11/1/2009
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)***
Automobile Liability Private Passenger Commercial		
Automobile Physical Damage Private Passenger Commercial Liability Other Than Auto	1,104,133	-5.0%
Glass Fidelity Surety Boiler and Machinery	1,101,100	
9. Fire 10. Extended Coverage 11. Inland Marine 12. Homeowners		
13. Commercial Multi-Peril 14. Crop Hail 15. Other Line of Insurance		
Does filing only apply to certain territor See Cover Letter	y (territories) or certain classes? I	f so, specify:
Brief description of filing. (If filing follows See Cover Letter	ws rates of an advisary organizatio	on, specify organization):
* Adjusted to reflect all prior rate cha ** Change in Company's premium lever result from application of new rates	vel which will	
		West Bend Mutual Insurance Company Name of Company
		Lois Ebersold, Sr. Product Development Specialist Official - Title

Section 754.EXHIBIT A Summary Sheet (Form RF-3)

FORM (RF-3)

SUMMARY SHEET

	Annual Premium	Percent
Coverage	Volume (Illinois) *	Change (+or-) **
utomobile Liability Priv	ate	
assenger?		
Commercial		
utomobile Physical Da	mag	
Private Passenger		
Commercial		
iability Other Than Aut	317,383	-20%
Surglary and Theft		
Blass	**	
idelity		
Surety	RE	CEIVED
loiler and Machinery		
ire		
xtended Coverage	0	CT 0 8 2009
nland Marine		
lomeowners	ST/	ATE OF ILLINOIS MENT OF INSURANCE SPRINGFIELD
Commercial Multi-Peril	DEPART	SPRINGEIELD
crop Hail		
Othe <u>r</u>		
Life of Insurance	!	
Does filing only apply to Classes? If so,	certain territory (territories) o	r certain
	lo.	
specify.		
Brief description of filing	. (If filing follows rates of an	advisory
Organization, specify		
organization):	We are filing a 20% decrea	ase in our EPLI rates. The decrease
s due to competition from comp	eting companies.	

Name of Company

Jessica Rudnik - Product Development Technician

Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in company's premium or rate level produced by rate revision effective			4/1/2010	
(1)	(2)		(3)	
	Annual Premium		Percent	
<u>Coverage</u>	Volume (Illinois)*		Change (+ or -)	
Automobile Liability Private				
Passenger Commercial				
2. Automobile Physical Damage		-		
Private Passenger Commercial				
3. Liability Other Than Auto	\$44,182	-	-4.0%	
Burglary and Theft		_		
5. Glass				
6. Fidelity		_		
7. surety		_		
· · · · · · · · · · · · · · · · · · ·		-		
8. Boiler and Machinery		-	· · · · · · · · · · · · · · · · · ·	
9. Fire	· · · · · · · · · · · · · · · · · · ·	_		
10. Extended Coverage		_	·	
11. Inland Marine		_		
12. Homeowners				
13. Commercial Multi-Peril		_		
14. Crop Hail		_		
15. Other				
Line of Insurance				
Does filing only apply to certain territory (territories) or certain class	ses? If so, specify:	No	
Brief description of filing . (If filing follows Adoption of ISO Loss Costs	rates of an advisory orgar	nization, specify org	ganization):	
Adjusted to reflect all prior rate changes. *Change in Company's premium level wl	nich will result from applica	ition of new rates.		
		Westport Insur	ance Corporation	
			of company	
		1,441110	company	
		Linda O L O		
			mpliance Specialist	
		Offic	ial-Title	

Change in Company's premium or rate level p	produced by rate revision effective	06/01/2010	
(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent <u>Change (+ or -)**</u>	
Automobile Liability Private			
Passenger Commercial			
2. Automobile Physical Damage			
Private Passenger Commercial			
3. Liability Other Than Auto	\$35,450,792	4.6%	
4. Burglary and Theft			
5. Glass			
6. Fidelity			
7. Surety			
8. Boiler and Machinery			
9. Fire			
10. Extended Coverage			
11. Inland Marine			
12. Homeowners			
14. Crop Hail			
15. Other			
Line of Insurance			
Does filing only apply to certain territory (territ Brief description of filing. (If filing follows rates Adopting ISO loss costs from filing GL-2009-BGL1; revisin	of an advisory organization, specify orga	anization):	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which	will result from application of new rates.		
	Zurich Ameri	ican Insurance Company	
	Nar Nar	me of Company	
	Cindy Schultz - Regulatory Ser	vice Analyst	
		Official – Title	

Change in Company's premium or rate level produced by rate revision effective _		produced by rate revision effective	06/01/2010	
	(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
1.	Automobile Liability Private			
2.	Passenger Commercial Automobile Physical Damage Private Passenger Commercial			
3.	Liability Other Than Auto	\$538,314	6.4%	
4.	Burglary and Theft			
5.	Glass			
6.	Fidelity			
7.	Surety			
8.	Boiler and Machinery			
9.	Fire			
10.	Extended Coverage			
	Inland Marine			
12.	Homeowners			
13.	Commercial Multi-Peril			
14.	Crop Hail			
15.	Other			
	Line of Insurance			
Do	es filing only apply to certain territory (terr	itories) or certain classes? If so, specify:		
	ef description of filing. (If filing follows rate pting ISO loss costs from filing GL-2009-BGL1; revise	es of an advisory organization, specify orga sing loss cost multiplier.	nization):	
	ljusted to reflect all prior rate changes. Change in Company's premium level whice	h will result from application of new rates.		
			Insurance Company of Illinois	
		Nan	ne of Company	
		Cindy Schultz - Regulatory Sen	vice Analyst	
			Official Title	